THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) and (b) The National Population Policy was approved by the Government, during February, 2000. The Policy seeks to put in place a multi sectoral agenda for population stabilistion which includes increasing out-reach and coverage of reproductive and child health care services, strenthening of health infrastructure, meeting the unmet needs for contraception services, and converging of integrated service delivery at village and house-hold levels.

Stabilising population is perceived also as a function of extending primary and secondary education, improving access to Safe drinking water, sanitation housing, and building roads, and providing transport and communication.

Spurious mineral Water Supply

969. SHRI GAYA SINGH:
SHRI GURUDAS DAS GUPTA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that most of the brands of bottled drinking water, labelled as mineral water, are spurious and some are not even fit to drink; and

(b) if so, the details thereof and the steps being taken, if any to check this kind of cheating and ensure that only pure drinking water/ mineral water bottle are sold in the market?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) There are no reports from State/UT Governments who are implementing the Prevention of Food Adulteration (PFA) Act, 1954/ Rules, 1955 that mineral water being sold in the market are spurious or unfit to drink.

(b) The Government has proposed to cover both packaged mineral water and packaged drinking water under mandatory certification on Bureau of Indian Standards (BIS) in order to maintain quality of

these products. The requisite draft gazette notifications have been issued for inviting public comments.

Resurgence of Malaria

970. DR. MOHAN BABU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there has been alarming resurgence of malaria in many parts of the country;

(b) whether it is also a fact that this is largely on account of lack of vector (mosquito) control in most of the rural areas, due to lack of funds with State Governments and high cost of insecticides approved by National Malaria Eradication Programme (NMEP); and

(c) if so, the steps taken by Government to reinvigorate the programme of spraying of insecticides in vulnerable States/areas and also to approve affordable insecticides for use by States, without delay?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) and (b) Incidence of malaria in the country as a whole is on the decline for the last four years. However, focal outbreaks of this disease were reported from some parts of Assam, Bihar, Haryana, Rajasthan Gujarat, Goa, West Bengal and Andhra Pradesh during this period.

Focal upsurge of malaria is attributed mainly to natural calamities like heavy rains, floods, operational deficiencies apart from inadequate and untimely release of funds by the State Governments to meet the operational cost.

(c) The steps taken for containment of malaria include:—

* Intensification of vector control measures through prioritization of areas for selective spray with appropriate insecticides and alternative and integrated vector control methods.

* Introduction of newer insecticides like Synthetic Pyrethorids for selective use as per technical requirements.